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CHICAGO, IL 606	506					(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/002,328	11/01/2001		Shahram Malek		11738.84217	3345
TITLE OF INVENTION: M	IETHOD AND APPA	RATUS FOR PROGRA	MMING AN IMPLANTA	BLE MEDICAL D	EVICE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	FEE TOTAL FEE(S) DUI	E DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/20/2006
EXAMINI	er er	ART UNIT	CLASS-SUBCLASS			
GETZOW, SCOTT M		3762	607-059000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR, 1, 363).			For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys			
Change of correspond Address form PTO/SB/12	dence address (or Cha 22) attached.	nge of Correspondence	or agents OR, alternati	vely,	Banne	er & Witcoff, Lto
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND				• •		
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Medtronic, Inc. Minneapolis, MN						
Please check the appropriate assignee category or categories (will not be printed on the patent):						oup entity Government
4a. The following fee(s) are						
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 Change in Entity Status a. Applicant claims Sl 	*	,	Th Amplicantic malan	l-ii CMAT	I FAITHTY AND CO. 27 C	NED 1.27(-)(2)
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Authorized Signature	XXX XX	4	<u> </u>	Date	58,732	
Typed or printed name	Stephen L		·····	Registration N	0. 🗉	
This collection of information an application. Confidentialis submitting the completed apthis form and/or suggestions Box 1450, Alexandria, Virgina 22313-	1750.				ne public which is to file (an inutes to complete, including ments on the amount of the frademark Office, U.S. Dep. SEND TO: Commissioner isplays a valid OMB contro	